

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) OHIO VOTER FUND POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00621995	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 10 / 03 / 2016	

Full Name of Payee OVF PAC payroll [MEMO ITEM] estimated October 2016		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2016	
Mailing Address 20 S 3rd St Suite 210		Amount 21417.00	
City Columbus	State OH	Zip Code 43215	Transaction ID : WFT2016932225-1
Purpose of Expenditure October canvassers estimated		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Portman, Rob, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		56958.00	

Full Name of Payee OVF PAC payroll [MEMO ITEM] estimated October 2016		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2016	
Mailing Address 20 S 3rd St Suite 210		Amount 21417.00	
City Columbus	State OH	Zip Code 43215	Transaction ID : WFT2016932224-1
Purpose of Expenditure October canvassers estimated		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Strickland, Ted, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		56958.00	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Holt, David, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2016

Signature

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(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) OHIO VOTER FUND POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00621995	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 10 / 03 / 2016	

Full Name of Payee OVF PAC payroll <input checked="" type="checkbox"/> estimated October 2016		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2016	
Mailing Address 20 S 3rd St Suite 210		Amount 21417.00	
City Columbus	State OH	Zip Code 43215	Transaction ID : WFT2016932218-1
Purpose of Expenditure October canvassers estimated		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		56958.00	

Full Name of Payee OVF PAC payroll <input checked="" type="checkbox"/> estimated October 2016		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2016	
Mailing Address 20 S 3rd St Suite 210		Amount 21417.00	
City Columbus	State OH	Zip Code 43215	Transaction ID : WFT2016932223-1
Purpose of Expenditure October canvassers estimated		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		56958.00	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	42834.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Holt, David, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2016

Signature